

Wisconsin

eHealth Care Quality and Patient Safety Board

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Wisconsin eHealth Action Plan Executive Summary

December 1, 2006

Wisconsin eHealth Care Quality and Patient Safety Board

Foreword

This document is submitted to Governor Jim Doyle to meet the requirements set out in Executive Order #129, November 2005, creating the eHealth Care Quality and Patient Safety Board and directing the Board to create a five-year plan for statewide adoption of health information technology and health information exchange.

For more information about the Wisconsin eHealth Board and its activities and for copies of this report, visit http://ehealthboard.dhfs.wisconsin.gov.

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Introduction

No patient should ever be harmed by lack of information at the point of patient care.

Wisconsin, and the nation, must achieve this vision.

The *Wisconsin eHealth Action Plan* will move our state forward to develop the health information infrastructure we need for improved health care. It is a plan to save lives, improve the health status of the people of Wisconsin and achieve a better return on investment in health care. This is not a plan about an information technology project – it is about improving the health system. It will be measured by its success in improving the health status of the people of Wisconsin.

The *Action Plan* was developed by the eHealth Care Quality and Patient Safety Board, created by Governor Jim Doyle through Executive Order #129 in November 2005. When he appointed the members of the new Board in early 2006, the Governor challenged Wisconsin to achieve statewide adoption of electronic health records and information exchange to enable better, safer and more efficient patient care. Among other responsibilities, the new eHealth Board was charged to develop a five-year *Action Plan* with recommendations for state-private partnerships to implement the needed statewide health information infrastructure.

The Executive Order specifies that the *Action Plan* will guide Wisconsin state government's legislative and regulatory actions, encourage coordinated efforts in the private health care sector, further public and private partnerships for the development of a statewide electronic health information infrastructure, and maximize federal financial participation to support early adoption of the electronic health information infrastructure that provides needed information at the point of patient care. The Executive Order also stresses the importance of aligning state with national efforts, protecting the privacy and security of information in electronic information exchange, and engaging consumers and health care purchasers in improving the value of medical care while controlling costs.

The eHealth Care Quality and Patient Safety Board took its charge seriously and enthusiastically. The help of hundreds of volunteers from across the state combined with extensive research allowed the eHealth Board and its five workgroups to develop this first-ever *Wisconsin eHealth Action Plan*. At its November 14, 2006 meeting, the Board endorsed the strategies and recommendations in this plan to meet the expectations in the Governor's Executive Order.

With this report, the eHealth Care Quality and Patient Safety Board presents a compelling, achievable vision and pathway for statewide adoption of an electronic health information infrastructure by 2012. The eHealth Board submits this report to the Governor and other interested parties with the conviction that Wisconsin can lead the nation in delivering safe, high quality and cost effective health services enabled by deployment and smart use of a sound statewide technology platform.

Executive Summary

Wisconsin has an opportunity to deploy technology to transform health care; an opportunity that did not exist just a few years ago. Our fundamental reason for doing so is to achieve a better, safer and more efficient health system and thereby improve the overall health of Wisconsin's population. Wisconsin seeks better value for the money collectively spent on prevention and treatment services which will improve the state's economic vitality and competitive position.

Health information today is fragmented, often inaccessible and error prone. Patients, providers, public health authorities, and payers often make important decisions with inadequate information. Technology provides a platform to manage and access information to transform the health care sector, to make health care investments more productive, and to improve the safety and quality of health care. None of this is possible without the investment in health information technology and exchange. Better information is needed so that all health care providers in Wisconsin can deliver patient-centric care, consistent with the six aims for improvement established by the Institute of Medicine for health care that is safe, effective, patient-centered, timely, efficient and equitable.¹

There is now a wonderful opportunity to accelerate ground-breaking work already underway in the state led by health care provider organizations, physicians, public health, technologists, scholars, and public and private health care purchasers. Wisconsin already enjoys a high level of information technology adoption in health care and public health. Many large health systems are already moving ahead with electronic health records and other investments. In both the health care and technology sectors, Wisconsin benefits from strong intellectual resources and a commitment to succeed in statewide health information technology (HIT) and health information exchange (HIE).

Collaboration between Wisconsin's public and private health care purchasers is nationally recognized. For example, the Wisconsin Collaborative for Healthcare Quality, the Wisconsin Health Information Organization, the Wisconsin Medical Society and the Wisconsin Hospital Association, major insurers and provider organizations are collaborating on the measurement and reporting of health care quality and costs. Our work in Wisconsin is well aligned with goals of our federal government leadership and activities in other leading states.

The eHealth Plan seeks to leverage these and other initiatives to help Wisconsin lead the nation in transforming health service delivery using health information technology and exchange. This five-year plan contains recommendations, plans, and timetables to achieve the goals set out in the Governor's Executive Order for

¹ Institute of Medicine, *Crossing the Quality Chasm: A New Health System for the Twenty-first Century.* (Washington: National Academies Press, 2001).

statewide health data exchange between payers, health care providers, consumers of health care, researchers and government agencies. It also recognizes the essential role of consumers and patients and seeks to empower and support individuals to take responsibility for their own health. It balances privacy rights with providers' needs to share information for safe, effective treatment.

Health information technology and health information exchange will enable:

- Improvement in the state's economy and competitive position as the health care system is transformed and health care investments result in better outcomes.
- A transformation of the health care sector that creates healthy cooperation and healthy competition among providers with patients, payers and other partners contributing to better outcomes.
- Improvement in the health of Wisconsin's population through appropriate prevention, early intervention and treatment.
- Continuous quality improvement in health care delivery to improve value.
- Consistent practice of safe, high quality and evidence-based medicine as the state builds and leverages health information technology (HIT).

This plan weaves together three strategies to take a coherent, whole-systems approach to transformation of the health care sector:

- Improve quality, safety and value by establishing the eHealth technology platform to provide needed information at the point of patient care.
- Encourage the development, alignment and implementation of value-based purchasing policies and actions across the public and private sectors.
- Link HIT and HIE plans to prevention and disease management activities.

These strategies will guide the activities over the next five years. They rely on joint public-private ownership with active collaboration and coordination of related system improvement efforts. Working together, we will build on the strengths that exist in Wisconsin and apply the best information available from around the country. These strategies offer a fundamental opportunity to reform health care in our state and join other leaders around the country committed to similar national reforms.

eHealth Action Plan Components

- 1. Establish the eHealth technology platform.
 - a. HIT adoption.
 - b. Regional health information exchange (HIE).
 - c. Statewide HIE services.
- 2. Value-based purchasing policies and actions.
- 3. Link HIT and HIE plans to prevention and disease management activities.
- 4. Take an incremental approach growing thoughtfully over time with frequent evaluation of progress.

Here are the basic components of the plan:

1. Establish the eHealth technology platform.

a. HIT adoption

- Encourage health care providers to adopt and use electronic health record systems by providing start-up funding for safety net providers and small and/or rural providers that are not able to afford them, by offering education and technical assistance and by endorsing standards for these systems to minimize the risk associated with purchasing decisions.
- 2) Also encourage all providers to continue and increase investment in electronic health record systems through value-based purchasing strategies by public and private payers (described more fully in Component #2 below).
- 3) Regularly monitor progress toward achieving benchmark goals for adoption (Component #4 below) and offer added recommendations to public and private partners as needed to achieve necessary progress.

b. Regional health information exchange (HIE)

- Foster the creation of regional (sub-state) health information exchanges to enable exchange of high-value patient information to recognize that local needs should drive the mission and structure of the organization, and that, to date, local markets have had the greatest economic sustainability and participant trust.
- 2) Focus early on timely patient information for providers when and where they need it for patient care for example, comprehensive information on patient allergies, medications and past diagnoses.

- 3) Support the Wisconsin Health Information Exchange (WHIE), a Regional Health Information Organization (RHIO) in Southeast Wisconsin, focusing on real-time information for hospital emergency rooms, results delivery and medication lists. Share technologies and lessons learned as appropriate across the state.
- 4) Simultaneously encourage the development of up to four new RHIOs in other areas of the state by providing state-supported contracts and technical assistance.
- 5) Limit Wisconsin funding to RHIOs meeting minimum requirements including:
 - i. Population served (at least one million people in the geographic area it covers).
 - ii. Alignment with natural "Medical Trading Areas."
 - iii. Willingness to serve all members of the communities in the designated area cannot be vendor-driven or exclusive to a limited subset of payers or providers.
 - iv. Independent status with broad governance including both public and private sector representatives and strong consumer representation.
 - v. Compliant with state and national standards for interoperability, and committed to statewide and nationwide network development.
 - vi. Policies and systems to assure privacy, security and confidentiality of health information.
 - vii. Inclusion of public health agencies.
 - viii. A well-developed and viable business plan.
- 6) Simultaneously develop statewide health information exchange services to:
 - i. Serve as the link between RHIOs, other states and the Nationwide Health Information Network (NHIN).

- ii. Provide basic infrastructure services that are most cost effective on a statewide scale and that can leverage existing state assets, such as record locator and user authentication services.
- iii. Develop strategies to assure information access to providers outside of a regional health information exchange or who straddle multiple RHIOs, as may happen with rural or boundary areas.
- iv. Make practice guidelines/clinical decision support available for health care providers (as a resource for their use and not a state requirement).
- v. Provide a Web portal for consumers to obtain health education materials and access to the practice guidelines.
- vi. Set standards and policies for health information exchange consistent with national standards.

2. Stimulate the development, alignment and implementation of value-based purchasing policies and actions across the public and private sectors.

- a. Encourage the creation of formal partnerships between payers and providers – such as the Wisconsin Collaborative for Healthcare Quality, the Wisconsin Hospital Association, the Wisconsin Medical Society, Employee Trust Funds, the Wisconsin Health Information Organization and the Wisconsin Medicaid program - to develop standard requirements for reimbursement, including new Pay for Quality (P4Q) incentives.
- b. Leverage the purchasing power of state government by working in common to align incentives for providers to:
 - Acquire use of certified EHR systems and participate in health information exchange.
 - Use evidence-based clinical decision support.
 - Support engagement of consumers in their own health care.
 - Publicly report on health care outcomes.
 - Participate in public health surveillance.
- c. Actively collaborate with health care purchasers, including private employers as well as other governmental purchasers, all payers, professional associations and health care providers, to promote consistency and alignment of incentives and other strategies for promoting high quality, safe and efficient health care, enabled by an appropriate health information infrastructure and public reporting.

- d. Create an active agenda to seek federal and foundation funding to develop and model these systems for the nation.
- e. Establish a contract between DHFS, ETF and the Wisconsin Health Information Organization (WHIO) to build a data repository to track outcomes, quality and cost of episodes of care for quality improvement, public reporting and public health assessment functions.
- f. Evaluate the impact of public reporting on health care outcomes.

3. Link HIT and HIE plans to prevention and disease management activities.

- a. Identify the unique roles for HIT and HIE in population health improvement.
- b. Leverage the Robert Wood Johnson "Common Ground" grant to Wisconsin DHFS to create comprehensive and effective statewide chronic disease surveillance, including population health baseline information for the entire Medicaid population (representing 15% of the Wisconsin's population).
- c. Develop a routine health risk assessment and a member agreement for the Medicaid population to guide taking personal responsibility for health and health care.
- d. Actively promote use of chronic disease management tools by safety net providers and continue to strengthen care management strategies across the Medicaid population in general.
- e. Engage long-term-care providers in eHealth implementation activities to address and improve the coordination of care across health settings.
- f. Conduct research through focus groups to identify the best approaches to engaging patients with high quality health information and decision support tools for making health care decisions.
- g. Develop health information system tools and research data that will support stronger public-private partnerships to achieve the goals of *Healthiest Wisconsin 2010*, the state health plan; for example, improving nutrition and physical activity, prevention of tobacco use, and other cost-effective strategies to reduce the burden and unnecessary high costs of chronic disease and other preventable illnesses and injuries.

- h. Establish biosurveillance capabilities across the public and private sectors for rapid outbreak detection, management and recovery.
- i. Assure interoperability of HIT/HIE with Wisconsin's Public Health Information Network.
- j. Link clinical information to public health information initiatives in ways that are effective and efficient for both health care delivery and public health.
- k. Define respective roles of the eHealth Board and the Governor-appointed Public Health Council.
- 1. Align the work of public health, business and medicine to foster collaboration and to support health care transformation.

4. Take an incremental approach - growing thoughtfully over time with frequent evaluation of progress.

- a. Address HIT and HIE simultaneously, recognizing that existing data is available for exchange without waiting for universal adoption of electronic health records and other technology.
- b. Establish performance goals and annual benchmarks for achieving the goal of statewide HIE and HIT in the plan, and initial strategies to move forward through voluntary public-private partnerships and investments.
- c. Actively foster continued deepening of effective public-private sector partnerships to achieve mutually beneficial goals of higher quality, safer and more efficient health care through HIT and HIE.
- d. Start with projects that build essential infrastructure while adding value for providers and consumers in the short term.
- e. Develop an infrastructure that is flexible, scalable, adaptable and replicable.
- f. Use standards consistent with national direction.
- g. Create incentives for interoperable and certified systems.
- h. Build on existing assets in the public and private sector.

- i. Promote data reuse for authorized public health and research purposes.
- Conduct constant surveillance of new developments in both the public and private sectors to keep the plan relevant and to take advantage of new opportunities.
- k. Establish effective communication strategies to build engagement and trust across all stakeholders.
- Monitor progress closely and adjust strategies and activities as needed, recognizing that this is ground-breaking work, significant in scope, and that there are now many interrelated activities underway within the state and nationwide to transform the health care sector that must be taken into account as this plan unfolds.

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